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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PLL

Application Serial No	10/629.387
Confirmation No.	6512
Filing Date	
Inventorship	
Assignee	Microsoft Corporation
Group Art Unit	
Examiner	Hirl
Attorney's Docket No	MS1-524USC1
Title: Linguistic Disambiguation System and Method Usin	ng String-Based Pattern
Training To Learn To Resolve Ambiguity Sites	•

## RESPONSE TO THE FINAL OFFICE ACTION DATED DECEMBER 9, 2004

Commissioner of Patents and Trademarks To: Alexandria, VA 22313

William J. Breen III (Tel. 509-324-9256; Fax 509-323-8979) From: Customer No. 22801

This communication is in response to the Final Office Action dated December 9, 2004, for which a three-month shortened statutory period for response is set for March 9, 2004.

Amendments to the Claims begin at page 2 of this paper.

Remarks begin at page 9 of this paper.

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PTO/S8/21 (08-03)

Approved for use through 07/31/2008. OMB 0851-0031

-9-2005

U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number. Application Number 10/629,387 HECEIVEL Filing Date 7/29/2003 TRANSMITTAL <del>CENTRAL FAX CE</del>NTER First Named Inventor Eric D. Brill FORM Group Art Unit FEB U 9 2015 2121 (to be used for all correspondence after initial filing) Examiner Name JOSEPH P HIRL Attorney Docket Number MS1-524USC1 Total Number of Pages in This Submission ENCLOSURES (check all that apply) M Fee Transmittal Form After Allowance Communication Drawing(s) to Group Fee Attached Licensing-related Papers Appeal Communication to Board Petition of Appeals and Interferences X Amendment / Reply Petition to Convert to a Appeal Communication to Group After Final Provisional Application (Appeal Notice, Brief, Reply Brief) Affidavits/declaration(s) Power of Attorney, Revocation Proprietary Information Change of Correspondence **Extension of Time Request** Status Letter Address Express Abandonment Request Other Enclosure(s) (please Terminal Disclaimer Information Disclosure Statement Identify below): Request for Refund Certifled Copy of Priority CD, Number of CD(s) Documents Response to Missing Parts/ Remarks Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm William J. Breen, III/Reg. No. 45313 Individual Name Signature Date February 9, 2005 **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name **Cheryl Boies** Signature

This collection of information is required by 37 CFR 1.5. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) en application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

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PTO/SB/17 (12-04)
Approved for use through 07/31/2006, OMB 0651-0032
Lend Trademark Office: U.S. DEPARTMENT OF COMMERCE

Date 2/4/05

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Effective on 12/08/2004.			Complete if Known							
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005			Application Number 10/629,387							
			Filing Date 7/29/2003							
			First Named In	ventor	Eric D. Br	ill				
Applicant delma amail antihratatur. San 27 CER 1 27			Examiner Nam	ne	JOSEPH					
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		2121					
TOTAL AMOUN	T OF PAYMENT	(\$) 130.0	00	Attorney Dock	et No.	MS1 -524	USC1			
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
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Unarge any additional ree(s) or underpayments of ree(s) Under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
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FEE CALCUL	ATION									
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for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (S) Fee Paid (\$)										
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SUBMITTED BY	وس وسر			Registration No.	AEDAD		Telenhorse	500) 504 5	~~~	
Signature	Magn	Fred /		(Attorney/Agent)	45313		Telephone (5	324-92 	206	

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Name (Print/Type)| William J. Breen, III